



TOWN OF SMITHFIELD EMPLOYMENT APPLICATION

Name:	Date of Application:
Position Applied For:	
Home Address:	
Phone Number:	Email Address:

Are you at least 18 years of age? ☐ Yes ☐ No
(If no, you may be required to provide authorization to work)

Are you legally eligible for employment in the United States? ☐ Yes ☐ No
(If offered employment, you will be required to provide documentation to verify eligibility)

Are you able to perform the essential functions of the job for which you are applying, with or without a reasonable accommodation? (Do not answer unless you have been informed about the requirements of the job for which you are applying.) ☐ Yes ☐ No

On what date are you available to begin work? _____

Hourly Rate/Salary desired _____

Are you currently employed? ☐ Yes ☐ No

May we contact your current employer? ☐ Yes ☐ No

How did you hear about the position? ☐ Newspaper Ad ☐ Online Ad ☐ Social Media
☐ Friend/Relative ☐ Town Website ☐ Career Fair
☐ Other _____

Have you ever applied for employment with us before? ☐ Yes ☐ No When? _____

For what position(s)? _____

Do you have any relatives, including a spouse, who currently works for the Town?

☐ Yes ☐ No Please list name(s) and relationship(s)? _____

EDUCATION

	Name & Location	Number of years Completed	Degree Received	Subjects Studied or Major
High School				
College or University				
Trade or Other School				

Please indicate any education, training or professional memberships not listed above, which you believe qualifies you for the position you are seeking. Please include any active certifications that you may possess. You need not disclose membership in any professional organization that may reveal information regarding race, color, creed, sex, religion, national origin, age disability, marital status, veteran status or any other protected class.

EMPLOYMENT

Please list your last or current employer first, including U.S. Military Service.

Name & Address of Employer:	Dates of Employment:
Position Held:	Telephone Number:
Supervisor's Name:	Reason for Leaving:
Starting Pay:	Ending Pay:
Duties:	

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If you wish to describe additional work experience, attach the above information for each position on a separate sheet of paper.

Have you ever been terminated from employment or asked to resign by an employer? ☐ Yes ☐ No
If yes, please provide name(s) of employer and details.

Please explain any gaps in work history

PROFESSIONAL REFERENCES

Please provide the names of three persons not related to you that may provide a professional reference.

	Name	Phone Number	Relationship
1.			
2.			
3.			

Applicant Statement

Please read carefully before signing

The Town of Smithfield is an equal opportunity employer. The Town of Smithfield does not discriminate on account of race, color, religion, national origin, citizenship status, ancestry, age, sex, sexual orientation, marital status, disability, military status, gender, gender identity, gender expression, ethnicity, genetic information or any other classes or characteristics protected by federal, state or local law.

I hereby certify that the facts set forth in the above employment application are true and complete to the best of my knowledge and authorize the Town of Smithfield to verify their accuracy and to obtain reference information on my work performance. I hereby release the Town of Smithfield from any/all liability of whatever kind and nature which, at any time, could result from obtaining and having an employment decision based on such information.

I understand that, if employed, falsified statements of any kind or omissions of facts called for on this application shall be considered a basis for dismissal.

I understand that should an employment offer be extended to me and accepted that I will fully adhere to the policies, rules and regulations of employment of the Town of Smithfield. I further understand that neither the policies, rules, regulations of employment nor anything during the interview process shall be deemed to constitute the terms of an implied contract. I also understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is "at will" in nature, which means that the Employee may resign at any time and the Employer may discharge the Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

Signature of Applicant

Date